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~~STAFF MEETING~~

1. Introduction

At the regular Staff Meeting of 16 August 1963, a status report was made in regard the Fiscal 1963 budget and current manpower situation. In outlining the current situation, attention was directed to various events that occurred during Fiscal 1963 which relate to the design of current capabilities. These primary events are as follows:

a. During Fiscal 1963, the rate of personnel processing increased markedly as the Agency attempted to augment its on-duty strength. This increased rate of processing resulted in the approval of additional positions for the main processing components including the Medical Staff. The additional positions authorized the Medical Staff were not accompanied by the additional required funds.

b. The Assessment and Evaluation Staff was transferred to the Medical Staff and the total Medical Staff complement and budget were increased in direct proportion. At the time of transfer, it had been decided that no increased on-duty capabilities would be authorized the Assessment and Evaluation Staff pending a study of the A & E program and identification of Agency needs. This limitation of on-duty strength permitted the availability of funds for other purposes and it was this availability which prompted the Comptroller's Office to suggest that no additional monies were necessary to offset new processing capabilities.

c. A variety of Medical Staff objectives were identified and established as goals for the future. It is the determination to continue the growth record of Medical Staff service and the obtainment of objectives that creates the present areas of problem. If the Medical Staff were content to do no more this year than last year, then no problem would exist.

2. Fiscal 1964 Budget

Sometime ago, the Director decided to hold the Agency budget to the Congressional budget. This meant that any increases on behalf of any Agency component would have to be authorized at the expense of some other component allocation. In the case of the Medical Staff, some additional funds were approved and the Fiscal 1964 formula is as follows: The Fiscal 1963 costs minus the non-recurring items establishes the "fiscal base" and the "fiscal base" plus \$120,000 equals the Fiscal 1964 allocation. Fiscal 1963 cost expenses are based upon the effective on-duty strength of the Medical Staff during 1963, which is 98.

The \$120,000 over the Fiscal 1963 base will provide payment as follows: \$80,000 for general pay increases, \$10,000 for physician pay increases, and \$15,000 for invitee travel. This leaves a balance of \$15,000, as of the moment uncommitted. This balance is not sufficient for those capabilities requested over and above the Fiscal 1963 base.

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These include the six positions for added capabilities, the dependent medical facility, the annual executive program, and other additional capabilities, not to mention the Bio-Medical Electronics Project and

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Nor is the balance sufficient to offset contractual services increases. Nor is there sufficient funds to provide for a consultant program on behalf of the Office of C/MS.

3. Manpower

Reference is made to the chart of 1 August 1963 as distributed at the Meeting. It should be noted that the Development Complement, as a functional responsibility, has become incorporated in the Office of C/MS. Reference was made to a copy of a memorandum from the Acting DD/S, dated 2 August 1963, on the subject of manpower, and the return reply from C/MS, dated 13 August 1963.

4. Manpower Controls

It is evident from the foregoing that certain controls are necessary to comply with the interim ceiling imposed by the DD/S' Office and to prevent budgetary expenditures which would be inappropriate in terms of Object Class 100. The manpower controls are as follows:

- a. The Medical Staff ceiling is frozen as of the on-duty strength of 1 August 1963. The strength accountability includes detailed personnel and full-time contract personnel. The imposition of this control works an inequity on the Assessment and Evaluation Staff which will have to be dealt with at a later date.
- b. The Table of Organization and classification should be brought into line so that the Medical Staff base reflects accurately the authorized capabilities.
- c. The replacement for attrition will require specific approval of the Office of C/MS.

In order to effectively experience such controls, the Deputy Chief, Medical Staff is requested to act as Manpower Control Officer. In this regard, whatever classification or reclassification that is necessary to bring position descriptions up to date should be initiated as soon as convenient with the advice and guidance of the Manpower Control Officer.

These manpower controls will remain in effect until additional change is required. It is hoped that, as reported at a previous meeting, a manpower decision will be forthcoming by 1 September or at least in the not too distant future. Granted such decision is made, then, if the current rate of processing is to decrease, some portion of current capabilities will be diverted to other areas of Medical Staff interest. If the rate

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of personnel processing is to remain the same, then inherent in such decision is the possibility of seeking and obtaining new and additional capabilities.

5. Budget Controls

The chart on Contractual Services costs, Object Class 700, was distributed at the Meeting. The final revised authorization for Fiscal 1964 is as follows: [REDACTED] Psychiatric Staff, [REDACTED]

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To offset these decreases in the Clinical Division and the Psychiatric Staff, it was suggested that, if the respective components cared to recoup such decreases, then attention might be directed to pursuing the possibility of charging for covert examinations and also for using insurance policy monies rather than the emergency fund.

Since the balance of monies after contractual services costs have been deducted amounts to approximately \$5,000 over the Fiscal 1963 base, additional controls are necessary to provide sufficient funds for contingencies. These additional controls are as follows:

a. Overtime. Compensatory time will be used preferably. Monetary payments for overtime may be made but only in those instances where a component is below authorized strength for reasons other than the taking of annual leave.

b. Per Diem. Per diem for new employees will be reviewed at the end of 30 days and will be discontinued at the end of an additional 2-week period if no plan exists for another assignment.

c. Supplies and Equipment. A ceiling is placed on supplies at \$21,000 and on equipment at \$5,000.

Within the \$21,000, there are monies to pay for books and periodicals for medical personnel overseas. If these costs can be shifted to the DD/P, then additional monies might become available to the Operations Division for a special project.

d. Transportation. The payment to new employees of costs for the movement of household goods will require the authorization of Chief, Medical Staff. Overseas travel will be decreased; the trips planned for the first 6-month period will be deferred at least in part. Air travel in the States will be paid at the rate of tourist class. The rate per mile for the use of private cars will be decreased and, in general, a rule of thumb will be to pay the equivalent of bus fare transportation.

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6. Conclusion

The Medical Staff budget and manpower capabilities will be reviewed at least on a quarterly basis and, if additional changes or remedies are necessary, these will be effected.

MS/JRTietjen:mam

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